

## California Regional Water Quality Control Board

## **Los Angeles Region**

**Linda S. Adams** *Cal/EPA Secretary* 

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Arnold Schwarzenegger Governor

## **BOARD ORDER TRANSFER REQUEST FORM**

Company name, if appropriate  Mailing address  Facility Contact Person  (F	FOR REGIONAL I	Telephone No.  Telephone No.  BOARD USE ONLY)	
Mailing address			
		Telephone No.	
Company name, if appropriate		Telephone No.	
Signature (New Owner/Operator)		Date	
I understand that I am responsible for the waste discharge from this fand the Board Order; 2) the facility changed: and 3) I will notify the B type or manner of waste discharge	acility. I certify the y construction and oard of any materi	at: 1) I have reviewed the Report discharges from the site have no al change in this facility, any cha	of Waste Discharge t substantially ange in the amount,
Former Operator		New Operator	
Former Property Owner		New Property Owner	
Former Facility Name		New Facility Name	
TRANSFER FROM:		TRANSFER TO:	
I request the transfer of the existing contained in the above-referenced			_(effective date),
Street A	ddress	City	Zip
Facility Location:			

California Environmental Protection Agency